

State of New Jersey

DEPARTMENT OF HUMAN SERVICES
DIVISION OF ADDICTION SERVICES
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JON S. CORZINE

Governor

JENNIFER VELEZ
Commissioner

RAQUEL MAZON JEFFERS Director

April 23, 2008

Dear Providers:

Enclosed is an Administrative Bulletin that clarifies the New Jersey Division of Addiction Services' (DAS) position regarding eligibility for take-home medication for clients in Opioid Treatment Programs. Please note that this Bulletin is effective immediately. For future reference, the Bulletin will also be posted on DAS' website at http://www.state.nj.us/humanservices/das/licregs.htm.

If you have any question regarding this Administrative Bulletin, please contact Dr. Jude Iheoma at (609) 292-3326.

Thank you for your continued support of addiction treatment services in New Jersey.

Sincerely

Raquel Mazon Jeffers

Director

Enclosure

Administrative Bulletin Division of Addiction Services April 2008

SUBJECT: ELIGIBILITY FOR TAKE-HOME MEDICATION

I. PURPOSE

The purpose of this administrative bulletin is to clarify the New Jersey Division of Addiction Services position regarding eligibility for take-home medication for clients in Opioid Treatment Programs (OTPs).

II. <u>DIVISION POSITION</u>

Current best practice standards from the Center for Substance Abuse Treatment indicate the following:

Treatment program decisions on dispensing opioid treatment medications to patients for unsupervised use shall be determined by the OTP Medical Director and documented as such in the patient's chart. In determining which patients may be permitted unsupervised use, the OTP Medical Director shall consider the following criteria to determine if a patient is clinically indicated to handle opioid drugs for unsupervised ("take-home") use.

- (1) Absence of recent abuse of drugs (opioid or non-narcotic), including alcohol;
- (2) Regularity of clinic attendance;
- (3) Absence of serious behavioral problems at the clinic;
- (4) Absence of known recent criminal activity, e.g., drug dealing;
- (5) Stability of the patient's home environment and social relationships;
- (6) Length of time in comprehensive maintenance treatment;
- (7) Assurance that take-home medication can be safely stored within the patient's home; and
- (8) Whether the rehabilitative benefit the patient derived from decreasing the frequency of clinic attendance outweighs the potential risks of diversion.

III. SCOPE

Program facilities, OTPs, licensed physicians, and medical staff considering or currently dispensing opioid treatment medications in New Jersey.

EFFECTIVE DATE: IMMEDIATELY

As approved by:

Raquel Mazon Jeffers
Director
Division of Addiction Services

Louis Baxter, M.D., FASAM Medical Director Division of Addiction Services